

County: St. Croix
ST. CROIX HEALTH CENTER
1445 NORTH 4TH STREET

Facility ID: 8320

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NEW RICHMOND 54017 Phone: (715) 246-6991
Operated from 1/1 To 12/31 Days of Operation: 365
Operate in Conjunction with Hospital? No
Number of Beds Set Up and Staffed (12/31/01): 102
Total Licensed Bed Capacity (12/31/01): 129
Number of Residents on 12/31/01: 89

Ownership:
Highest Level License:
Operate in Conjunction with CBRF? No
Title 18 (Medicare) Certified? Yes
Title 19 (Medicaid) Certified? Yes
Average Daily Census: 91

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		38.2
Supp. Home Care-Personal Care	No					1 - 4 Years		37.1
Supp. Home Care-Household Services	No	Developmental Disabilities	4.5	Under 65	10.1	More Than 4 Years		24.7
Day Services	No	Mental Illness (Org./Psy)	28.1	65 - 74	15.7			-----
Respite Care	No	Mental Illness (Other)	14.6	75 - 84	29.2			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	2.2	85 - 94	39.3	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	5.6	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	10.1		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	11.2	65 & Over	89.9	-----		
Transportation	No	Cerebrovascular	10.1		-----	RNs		19.9
Referral Service	No	Diabetes	0.0	Sex	%	LPNs		6.1
Other Services	No	Respiratory	4.5		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	14.6	Male	27.0	Aides, & Orderlies		
Mentally Ill	Yes		-----	Female	73.0			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	Yes				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care		Managed Care			Total Resi - dents	% Of All		
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)					
Int. Skilled Care	0	0.0	0	2	3.1	119	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	2	2.2
Skilled Care	6	100.0	337	53	82.8	101	0	0.0	0	19	100.0	125	0	0.0	0	0	0.0	0	78	87.6
Intermediate	---	---	---	5	7.8	83	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	5	5.6
Limited Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	4	6.3	152	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	4.5
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	6	100.0		64	100.0		0	0.0		19	100.0		0	0.0		0	0.0		89	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	8.4	Daily Living (ADL)	Independent			
Private Home/With Home Health	7.5	Bathing	7.9	75.3	16.9	89
Other Nursing Homes	5.6	Dressing	16.9	70.8	12.4	89
Acute Care Hospitals	75.7	Transferring	20.2	69.7	10.1	89
Psych. Hosp.-MR/DD Facilities	1.9	Toilet Use	18.0	66.3	15.7	89
Rehabilitation Hospitals	0.0	Eating	64.0	20.2	15.7	89
Other Locations	0.9	*****				
Total Number of Admissions	107	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	3.4	Receiving Respiratory Care		5.6
Private Home/No Home Health	41.3	Occ/Freq. Incontinent of Bladder	70.8	Receiving Tracheostomy Care		1.1
Private Home/With Home Health	8.3	Occ/Freq. Incontinent of Bowel	50.6	Receiving Suctioning		0.0
Other Nursing Homes	4.6			Receiving Ostomy Care		0.0
Acute Care Hospitals	3.7	Mobility		Receiving Tube Feeding		2.2
Psych. Hosp.-MR/DD Facilities	1.8	Physically Restrained	4.5	Receiving Mechanically Altered Diets		29.2
Rehabilitation Hospitals	0.0					
Other Locations	10.1	Skin Care		Other Resident Characteristics		
Deaths	30.3	With Pressure Sores	2.2	Have Advance Directives		36.0
Total Number of Discharges		With Rashes	2.2	Medications		
(Including Deaths)	109			Receiving Psychoactive Drugs		74.2

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Government Peer Group %	Ratio	Bed Size: 100-199 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	70.5	81.4	0.87	83.8	0.84	84.3	0.84	84.6	0.83
Current Residents from In-County	79.8	84.1	0.95	84.9	0.94	82.7	0.96	77.0	1.04
Admissions from In-County, Still Residing	28.0	32.4	0.86	21.5	1.31	21.6	1.30	20.8	1.35
Admissions/Average Daily Census	117.6	64.0	1.84	155.8	0.75	137.9	0.85	128.9	0.91
Discharges/Average Daily Census	119.8	66.7	1.80	156.2	0.77	139.0	0.86	130.0	0.92
Discharges To Private Residence/Average Daily Census	59.3	19.2	3.09	61.3	0.97	55.2	1.08	52.8	1.12
Residents Receiving Skilled Care	89.9	85.0	1.06	93.3	0.96	91.8	0.98	85.3	1.05
Residents Aged 65 and Older	89.9	84.3	1.07	92.7	0.97	92.5	0.97	87.5	1.03
Title 19 (Medicaid) Funded Residents	71.9	77.7	0.93	64.8	1.11	64.3	1.12	68.7	1.05
Private Pay Funded Residents	21.3	16.8	1.27	23.3	0.91	25.6	0.83	22.0	0.97
Developmentally Disabled Residents	4.5	3.2	1.39	0.9	5.11	1.2	3.82	7.6	0.59
Mentally Ill Residents	42.7	56.2	0.76	37.7	1.13	37.4	1.14	33.8	1.26
General Medical Service Residents	14.6	15.4	0.95	21.3	0.69	21.2	0.69	19.4	0.75
Impaired ADL (Mean)	44.7	49.2	0.91	49.6	0.90	49.6	0.90	49.3	0.91
Psychological Problems	74.2	65.9	1.13	53.5	1.38	54.1	1.37	51.9	1.43
Nursing Care Required (Mean)	5.3	7.6	0.71	6.5	0.82	6.5	0.82	7.3	0.73